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PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 04AB026/YOD	Total Pages 39
		ALBR:0142/YOD	
		First Named Inventor or Application Identifier Brian J. Taylor	
		Express Mail Label No.	EV 410033980US

APPLICATION ELEMENTS		Mail Stop Patent Application Commissioner for Patents	
<small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: PO Box 1450 Alexandria, VA 22313-1450	

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification Total Pages 19 <i>(preferred arrangement set forth below)</i> -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 5 Total Pages 15</p> <p>4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies</p>
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ACCOMPANYING APPLICATION PARTS	
8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(where there is an assignee)</i>
10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations
12. <input type="checkbox"/> Preliminary Amendment	13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
16. <input type="checkbox"/> Other	

17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ / _____	
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18. CORRESPONDENCE ADDRESS	
<input type="checkbox"/> Customer Number or Bar Code Label	<input checked="" type="checkbox"/> Correspondence address below
<div style="border: 1px solid black; height: 20px; width: 100%;"></div> <small>(Insert Customer No. or Attach bar code label here)</small>	

NAME	Alexander M. Gerasimow		
	Allen-Bradley Company, LLC		
ADDRESS	1201 South Second Street		
CITY	Milwaukee,	STATE	Wisconsin
COUNTRY	USA	TELEPHONE	(414) 382-5885
		ZIP CODE	53204-2496
		Fax	(414) 382-3900

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, PO Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT	(\$) 1,664.00
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Complete if Known

Applicati n Numb r

Unassigned

Filing Date

Herewith

First Named Inventor

Brian J. Taylor

Group Art Unit

Unassigned

Examiner Name

Unassigned

Attorney Docket Number

04AB026/YOD (ALBR:0142)

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit 01-0857/04AB026/YOD (ALBR:0142)

Account
Number

Deposit Account Name	Rockwell Automation Technologies, LLC
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- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other**FEE CALCULATION (fees effective 10/01/96)**

1. FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	<u>770.00</u>
106	330	206	165	Design filing fee	—
107	510	207	255	Plant filing fee	—
108	740	208	370	Reissue filing fee	—
114	160	214	80	Provisional filing fee	—
SUBTOTAL (1)					(\$)<u>770.00</u>

2. CLAIMS

		Extra		Fee from below		Fee Paid
Total Claims	<u>51</u> - 20 =	31	X	18	=	<u>558.00</u>
Independent Claims	<u>7</u> - 3 =	4	X	84	=	<u>336.00</u>
Multiple Dependent Claims	___		X	___	=	___
Large Entity		Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		
103	18	203	9	Claims in excess of 20		
102	84	202	42	Independent claims in excess of 3		
104	280	204	140	Multiple dependent claim		
109	84	209	42	Reissue independent claims over original patent		
110	18	210	9	Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)				(\$) 894.00		

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	—
127	50	227	25	Surcharge - late provisional filing or cover sheet.	—
139	130	139	130	Non-English specification	—
147	2,520	147	2,520	For filing a request for reexamination	—
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	—
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	—
115	110	215	55	Extension for response within first month	—
116	400	216	200	Extension for response within second month	—
117	950	217	475	Extension for response within third month	—
118	1,570	218	755	Extension for response within fourth month	—
119	310	219	155	Notice of Appeal	—
120	310	220	155	Filing a brief in support of an appeal	—
121	270	221	135	Request for oral hearing	—
138	1,510	138	1,510	Petition to institute a public use proceeding	—
140	110	240	55	Petition to revive unavoidably abandoned application	—
141	1,320	241	660	Petition to revive unintentionally abandoned application	—
142	1,320	242	660	Utility issue fee (or reissue)	—
143	450	243	225	Design issue fee	—
144	670	244	335	Plant issue fee	—
122	130	122	130	Petitions to the Commissioner	—
123	50	123	50	Petitions related to provisional applications	—
126	240	126	240	Submission of Information Disclosure Stmt	—
581	40	581	40	Recording each patent assignment per property (times number of properties)	0.00
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	—
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	—
Other fee (specify)				—	—
Other fee (specify)				—	—
SUBTOTAL (3)					(\$) 0.00

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name	Tait R. Swanson
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Reg. Number	48,226
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Signature _____

Date

November 19, 2003

Deposit Acct.	
User ID	

01-0857/04AB026/YOD
(ALBR:0142)